DWS-UI Form 620 Rev. 03/01

Utah Department of Workforce ServicesUnemployment Insurance



REQUEST FOR 20-WEEK QUALIFICATION

Under the usual method to establish monetary entitlement for unemployment benefits, you do not qualify. This is because your total base-period wages are less than 1.5 times your higher quarter.

You may, however, qualify under the 20-week provisions if you provide proof of wages of \$115 or more in each of 20 weeks in your base period (shown below). Please submit this proof with check stubs, time cards, or have your employer complete this form, with both the employer's and your signatures.

Mail to C.O. Claims, PO Box 45277, Salt Lake City, UT 84145-0277. Fax to: 801-526-9394

Claimant Name:		Social Security Number	ocial Security Number:	
Company Name:				
Base Period Begin Date:	End Date:			
	(to be completed by a D	epartment Representative)		
Pay Period	Gross Amount	Pay Period	Gross Amount	
Ending Date	<u>Earned</u>	Ending Date	<u>Earned</u>	
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			_	
			_	
			_	
			_	
			_	
		Title:		
Comp. Repr. Printed Name:		Account#	Phone#	
Claimant Signature:		Date:		
Pay Periods are: [] Weekly	[] Bi-weekly [] Semi-r	monthly [] Other		